

CERTIFICATE OF MAILING BY "EXPRESS MAIL" (37 CFR 1.10)

Applicant(s): Robert N. GOLDBERG, et al.

Docket No.

16159.018001; P6405

Application No.

10/044,927

Filing Date

01/11/2002

Examiner

Anh LY

Customer No.

32615

Group Art Unit

2172

Invention:

DETERMINING OBJECT GRAPH AND OBJECT GRAPH PROJECTION

RECEIVED

AUG 19 2004

I hereby certify that the following correspondence:

Response to Office Action dated May 17, 2004

Technology Center 2100

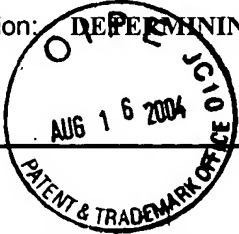
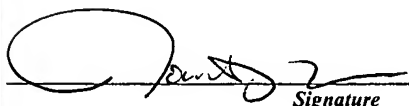
(Identify type of correspondence)

is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on

August 16, 2004*(Date)*Brenda C. McFadden*(Typed or Printed Name of Person Mailing Correspondence)**(Signature of Person Mailing Correspondence)*EV526069772US*("Express Mail" Mailing Label Number)***EV526069772US****Note: Each paper must have its own certificate of mailing.**

08-17-04

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AMENDMENT TRANSMITTAL LETTER (Large Entity)				Docket No. 16159.018001; P6405	
Applicant(s): Robert N. GOLDBERG, et al.					
Application No. 10/044,927	Filing Date 01/11/2002	Examiner Anh LY	Customer No. 32615	Group Art Unit 2172	Confirmation No. 4976
Invention: DETERMINING OBJECT GRAPH AND OBJECT GRAPH PROJECTION					
			RECEIVED AUG 19 2004 Technology Center 2100		
COMMISSIONER FOR PATENTS:					
Transmitted herewith is an amendment in the above-identified application.					
The fee has been calculated and is transmitted as shown below.					
CLAIMS AS AMENDED					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	23 -	23 =	0 x	\$18.00	\$0.00
INDEP. CLAIMS	4 -	4 =	0 x	\$86.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00
<input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 50-0591 <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17.					
 Signature			Dated: 8/16/04		
Jonathan P. Osha, Reg. No. 33,986 OSHA & M AY L.L.P. 1221 McKinney, Suite 2800 Houston, Texas 77010 Telephone: (713) 228-8600 Facsimile: (713) 228-8778			I certify that this document and fee is being deposited on _____ with the U.S. Postal Service as first class mail under 37 C.F.R. 1.8 and is addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450. _____ Signature of Person Mailing Correspondence _____ Typed or Printed Name of Person Mailing Correspondence		
CC:					